UNITED STATES DISTRICT COURT

for the

District of Maryland

PFLAG, Inc., et al.,)))
Plaintiff(s) V.) Civil Action No. BAH-25-337
Donald J. Trump, et al.,)))
Defendant(s)	_

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Matthew J. Memoli, in his official capacity as Acting NIH Director National Institutes of Health 9000 Rockville Pike Bethesda, MD 20892

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Zachary B. Cohen Jenner & Block LLP 1099 New York Avenue, NW, Suite 900 Washington, DC 20001

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

D.4	2/6/2025	
Date:		

CLERK OF COURT



Deputy Clerk

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (no	nme of individual and title, if a	ny)				
was rec	ceived by me on (date)						
	☐ I personally serve	d the summons on the inc	lividual at <i>(place)</i>				
			On (date)		; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)						
	, a person of suitable age and discretion who resides there,						
	On (date)	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summ		, who is				
	designated by law to	accept service of proces	s on behalf of (name of organiza	3			
			on (date)		; or		
	☐ I returned the sum	mons unexecuted because	e			; or	
	☐ Other (specify):						
	My fees are \$	for travel and	for service	es, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.						
Date:		_					
		er's signature					
		-	Printed	l name and title			
		No.	Serv	er's address			

Additional information regarding attempted service, etc:

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